City

As a below named inventor, I hereby declare:

the specification of which [check one(s) applicable]

that my residence, post office address and citizenship are as stated below next to my name;

that I believe I am the original, first and sole inventor (if only one name is listed below) or an original and first inventor (if plural inventors are named below) of the subject matter of this application which is entitled: A FIBRESCOPE TRAINING APPARATUS

and was am	ended by Amendment filed		(if applicable); [or];
is attached	to this Declaration, Power of Attorney and Power to	to Inspect;	
	have reviewed and understand the contents of the a	above-identified application	on, including the claims, as amended by any
that I Rule 56(a) [370	acknowledge my duty to disclose information which CFR§1.56(a)].	ch is material to the exami	nation of this application in accordance with
inventor's certif	ER 35 U.S.C. §119: I hereby claim foreign priority ficate listed below and have also identified below a of the application of which priority is claimed:		
Prior Foreig	n Application(s)	Filing Date	Priority Claimed
Application No. Country		Day-Mo-Year	Yes - No
336904	New Zealand	23 - 07 - 99	Yes
504890	New Zealand	01 - 06 - 00	Yes
POWER TO I accredited representation	power of substitution to prosecute this application with: Vincent T. Pace, Reg. No. 31,049 and Pacwith: Vincent T. Pace, Reg. No. 31,049 and Pacwith: I hereby give DANN, DORFMAN, Hiesentatives power to inspect and obtain copies of the ESPONDENCE TO: CUSTOMER NUMBER 0	trick J. Hagan, Reg. No. ERRELL AND SKILLM he papers on file relating to	27,643 IAN, P.C. of Philadelphia, PA or its duly
DIRECT INQ		Tel.: 215-563-4100 Fax: 215-563-4044	
believed to be t punishable by f	e that all statements made herein of my own known rue; and further that these statements were made volume or imprisonment, or both, under Section 1001 of jeopardize the validity of the application or any page 1	with the knowledge that with the last with the last of the United S	illful false statements and the like so made are
SC	OLE OR FIRST JOINT INVENTOR	SÉCOND JOIN	NT INVENTOR (if any)
Full Name <u>C</u>	HRISTOPHER HARGRAVE CHITTY First Middle Last	Full Name <u>BERN</u> First	
Signature	CALL.	Signature	
Date	30/1/02	Date 7-2	02.
Residence	Wellington NEW ZEALAND City State or Country	Residence Wellin City	State or Country
Citizenship	NEW ZEALAND	Citizenship NEW	ZEALAND
Post Office Ad	dress:	Post Office Address:	
Unit 4, 131	Park Road, Miramar	Unit 4, 131 Park	Road, Miramar
Wellington	NEW ZEALAND	Wellington	NEW ZEALAND

Zip Code

City

State or Country

Zip Code

State or Country

10031675.061902

THIRD JOINT INVENTOR

FOURTH JOINT INVENTOR (if any)

Full Name_COLI	N- PETER MAI	RSLAND	Full Name_				
/ <u>F</u> i)		ast		First	Middle	Last	
• —	shi Waviland		Signature_			 	
Date	8/2/02.		Date				
Residence Wellin			Residence	City	State	or Country	
Citizenship NEW ZEALAND			Citizenship				
Post Office Address:			Post Office Address:				
Unit 4, 131 Par	k Road, Miramar					· · · · · · · · · · · · · · · · · · ·	
Wellington	NEW ZEALAND					·	
City	State or Country	Zip Code	City	•	State or Country	Zip Code	